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## \*BIBDATASHEET\*

CONFIRMATION NO. 9922

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/014,774	<b>FILING OR 371(c) DATE</b> 10/29/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1652	<b>ATTORNEY DOCKET NO.</b> 2427/1F509-US1
<b>APPLICANTS</b> Alessandra D'Azzo, Memphis, TN; Antonella Bongiovanni, Palermo, ITALY; Tommaso Nastasi, Monterotondo Scalo, ITALY;				
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/US00/11900 04/28/2000 and claims benefit of 60/131,814 04/29/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 02/28/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 33
				<b>INDEPENDENT CLAIMS</b> 8
<b>ADDRESS</b> 29311				
<b>TITLE</b> PROTEIN SPECIFIC FOR CARDIAC AND SKELETAL MUSCLE				
<b>FILING FEE RECEIVED</b> 1880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	